

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F93000004645

1. Entity Name
DON CLOWERS MINISTRIES, INC.



Principal Place of Business

5746 MARLIN ROAD
SUITE 500
CHATTANOOGA, TN 37411

Mailing Address

5746 MARLIN ROAD
SUITE 500
CHATTANOOGA, TN 37411

FILED
Aug 14, 2008 08:00 AM
Secretary of State



07082008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
62-0812112

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 32324

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CLOWERS, DON 5746 MARLIN ROAD, SUITE 500 CHATTANOOGA, TN 37411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CLOWERS, SHARON 5746 MARLIN ROAD, SUITE 500 CHATTANOOGA, TN 37411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CLOWERS, SHARON 5746 MARLIN ROAD, SUITE 500 CHATTANOOGA, TN 37411
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08/14/08-80001-015 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/11/08

Date

Daytime Phone #